

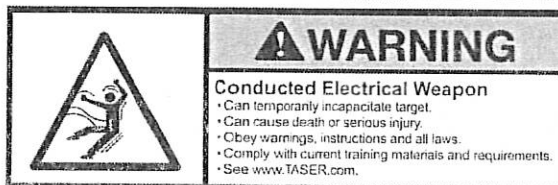
EXHIBIT “X”



**TASER® Handheld CEW
Warnings, Instructions, and
Information: Law Enforcement**



IMPORTANT SAFETY AND HEALTH INFORMATION



This document presents important safety warnings, instructions, and information intended to minimize hazards associated with the use of TASER International, Inc. (TASER) Conducted Electrical Weapons (CEWs). These instructions and warnings are for your protection as well as the safety of others. **Read the entire document before using a CEW.**

When used as directed in probe-deployment mode, CEWs are designed to temporarily incapacitate a person from a safer distance than some other force options, while reducing the likelihood of death or serious injury. However, any use of force, including the use of a CEW, involves risks that a person may get hurt or die due to the effects of the CEW, physical incapacitation, physical exertion, unforeseen circumstances, or individual susceptibilities. Following the instructions and warnings in this document will reduce the likelihood that CEW use will cause death or serious injury.

These warnings and instructions are effective **March 1, 2013**, and supersede all prior revisions and relevant Training Bulletins. **Immediately distribute this document to all TASER CEW users.** The most current warnings are also available online at www.TASER.com.

1. **Complete training first.** Significant differences exist between different TASER CEW models. Do not use or attempt to use any CEW model unless you have been trained by a Certified TASER Instructor on that particular model.¹
2. **Read and obey.** Read, understand, and follow all current instructions, warnings, and relevant TASER training materials before using TASER CEWs. Failure to do so could increase the risk of death or serious injury to the user, force recipient, or others.
3. **Obey applicable laws, regulations, and agency Guidance.** Use of CEWs must be legally justified and comply with applicable federal, state, and local laws and regulations. The decision to use a CEW in a particular manner or circumstance must follow applicable law enforcement agency Guidance.²

Always follow all current instructions, warnings, and TASER training materials to minimize CEW risks.

This document uses a signal word panel to mark specific warnings:

WARNING This signal word panel indicates a potentially hazardous situation which if not avoided could result in death or serious injury.

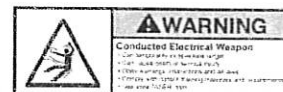
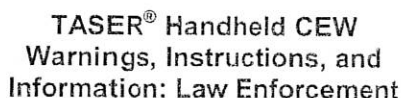
Warnings may be followed by instructions and information to help avoid the hazard and improve CEW safety.

SAFETY INFORMATION: CEW RISKS AND RISK AVOIDANCE

WARNING **Cumulative Effects.** CEW exposure causes certain effects, including physiologic and metabolic changes, stress, and pain. In some individuals, the risk of death or serious injury may increase with cumulative CEW exposure. Repeated, prolonged, or continuous CEW applications may contribute to cumulative exhaustion, stress, cardiac, physiologic, metabolic, respiratory, and associated medical risks

¹ A Certified TASER Instructor is not a TASER agent, but maintains a current TASER instructor certification and complies with TASER's most current training requirements, materials and license agreement. Representations inconsistent with this document made by any Certified TASER Instructor are expressly disclaimed.

² Law enforcement agencies are force experts and are solely responsible for their own Guidance. "Guidance" includes policy, custom, procedure, rule, order, directive, training, continuum, and standard. TASER has no authority to mandate Guidance, set policy, require training, or establish standards of care or conduct.



Physiologic and Metabolic Effects. CEW use causes physiologic and/or metabolic effects that may increase the risk of death or serious injury. These effects include changes in blood chemistry, blood pressure, respiration, heart rate and rhythm, and adrenaline and stress hormones, among others. In human studies of electrical discharge from a single CEW of up to 15 seconds, the effects on acid/base balance, creatine kinase, electrolytes, stress hormones, and vital signs were comparable to or less than changes expected from physical exertion similar to struggling, resistance, fighting, fleeing, or from the application of some other force tools or techniques.

Stress and Pain. CEW use, anticipation of use, or response to use can cause startle, panic, fear, anger, rage, temporary discomfort, pain, or stress which may be injurious or fatal to some people.

1. **Minimize the number and duration of CEW exposures.** Most human CEW lab testing has not exceeded 15 seconds of CEW application, and none has exceeded 45 seconds. Use the shortest duration of CEW exposure objectively reasonable to accomplish lawful objectives, and reassess the subject's behavior, reaction, and resistance before initiating or continuing the exposure. If a CEW deployment is ineffective in incapacitating a subject or achieving compliance consider alternative control measures in conjunction with or separate from the CEW.
2. **Avoid simultaneous CEW exposures.** Do not use multiple CEWs or multiple completed circuits at the same time without justification. Multiple CEWs or multiple completed circuits at the same time could have cumulative effects and result in increased risks.
3. **Control and restrain immediately.** Begin control and restraint procedures, including during CEW exposure ("cuffing under power"), as soon as reasonably safe and practical to minimize CEW cumulative effects and the total duration of exertion and stress experienced by the subject.
4. **Avoid touching probes/wires during CEW discharge.** Controlling and restraining a subject during CEW exposure may put the CEW user and those assisting at risk of accidental or unintended shock. Avoid touching the probes and wires and the areas between the probes during the electrical discharge.

Cardiac capture may be more likely in children and thin adults because the heart is usually closer to the CEW-delivered discharge (the dart-to-heart distance). Serious complications could also arise in those with impaired heart function or in those with an implanted cardiac pacemaker or defibrillator.

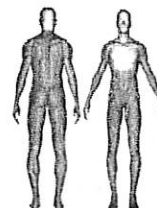


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To reduce the risk of injury:

1. **Use preferred target areas.** The preferred target areas (blue) are below the neck area for back shots and the lower center mass (below chest) for front shots. The preferred target areas increase dart-to-heart distance and reduce cardiac risks. Back shots are preferable to front shots when practicable.
2. **Avoid sensitive areas.** When practicable, avoid intentionally targeting the CEW on sensitive areas of the body such as the face, eyes, head, throat, chest area (area of the heart), breast, groin, genitals, or known pre-existing injury areas.



WARNING **Muscle Contraction or Strain-Related Injury.** CEWs in probe-deployment mode can cause muscle contractions that may result in injury, including bone fractures.

WARNING **Higher Risk Populations.** CEW use on a pregnant, infirm, elderly, or low body-mass index person or on a small child could increase the risk of death or serious injury. As with any force option, CEW use has not been scientifically tested on these populations. Use a CEW on such persons **only** if the situation justifies an increased risk.

CEWs in probe-deployment mode can cause muscle contractions resulting in injuries similar to those from physical exertion, athletics, or sports, including hernia rupture, dislocation, tear, or other injury to soft tissue, organ, muscle, tendon, ligament, cartilage, disc, nerve, bone, or joint; or injury or damage associated with or to orthopedic or other hardware. Fractures to bone, including compression fracture to vertebrae, may occur.

These injuries may be more serious and more likely to occur in people with pre-existing injuries, orthopedic hardware, conditions or special susceptibilities, including pregnancy; low bone density; spinal injury; or previous muscle, disc, ligament, joint, bone, or tendon damage or surgery. Such injuries may also occur in drive-stun applications or when a person reacts to the CEW deployment by making a rapid or unexpected movement.

WARNING **Secondary injury.** The loss of control resulting from a CEW exposure may result in injuries due to a fall or other uncontrolled movement. When possible, avoid using a CEW when secondary injuries are likely.

Loss of control associated with CEW use can have several causes:

- **Seizure.** Repetitive stimuli (e.g., flashing light or electrical stimuli) can induce seizure in some people, which may result in death or serious injury. This risk may be increased in a person with epilepsy, a seizure history, or if electrical stimuli pass through the head. Emotional stress and physical exertion, both likely in incidents involving CEW and other uses of force, are reported as seizure-precipitating factors.
- **Fainting.** A person may experience an exaggerated response to a CEW exposure, or threatened exposure, which may result in fainting or falling.
- **Muscle contraction, incapacitation, or startle response.** CEW use may cause loss of control from muscle contraction, incapacitation, or startle response.

To reduce these risks, consider the person's location before using a CEW. When practicable, avoid using a CEW on a person in the following circumstances unless the situation justifies a higher risk.

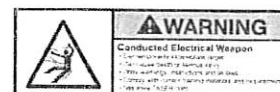
When practicable, avoid using a CEW on a person who:

- is on an elevated or unstable surface (e.g., tree, roof, ladder, ledge, balcony, porch, bridge, or stair);
- could fall and suffer impact injury to the head or other area;
- could fall on a sharp object or surface (e.g., holding a knife, falling on glass);
- is less able to catch or protect self in a fall (e.g., restrained, handcuffed, incapacitated, or immobilized);
- has impaired reflexes (e.g., from alcohol, drugs or certain medications);
- is running, in motion, or moving under momentum;

March 1, 2013

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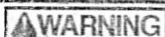
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- is operating or riding any mode of transportation (e.g., vehicle, bus, bicycle, motorcycle, or train), conveyance (e.g., escalator, moving walkway, elevator, skateboard, rollerblades), or machinery; or
- is located in water, mud, or marsh environment if the ability to move is restricted.


SAFETY INFORMATION: INJURY OR INFECTION

A CEW may cause injury as a result of the probe or electrical discharge. The nature and severity of these effects depends on numerous factors including the area of exposure, method of application, individual susceptibility, and other circumstances surrounding CEW use, exposure, and after care. Medical care may be required.



WARNING **Eye Injury Hazard.** A TASER probe, electrode, or electrical discharge that contacts or comes close to an eye can result in serious injury, including permanent vision loss. **DO NOT** intentionally aim a CEW, including the LASER, at the eye of a person or animal without justification.



 **LASER Light Hazard.** CEWs use a LASER targeting aid. LASERs can cause serious eye injury, including permanent vision loss. **NEVER** aim a LASER at an aircraft or the operator of an aircraft or moving vehicle.



WARNING Probe or Electrode Injury, Puncture, Scarring, or Infection Hazard. CEW use may cause a permanent mark, burn, scar, puncture, or other skin or tissue damage. Infection could result in death or serious injury. Scarring risk may be increased when using a CEW in drive-stun mode. Increased skin irritation, abrasion, mark, burning, or scarring may occur with a CEW with multiple cartridge bays when used in drive-stun or three-point deployment modes.

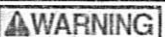


WARNING Penetration Injury. The TASER probe has a small dart point which may cause a penetration injury to a blood vessel or internal organ, including lung, bone, or nerve. The probe or dart point (which may detach or break) can puncture or become embedded into a bone, organ, or tissue, which may require immediate medical care, surgical removal, or may result in scarring, infection, or other serious injury.

To reduce the risk of serious or permanent injury:

1. **Provide medical care as needed.** Injury due to penetration of a probe or dart point into a blood vessel, organ, nerve, or bone may require medical care. A probe, dart point, or barb embedded in a sensitive area such as the eye, genitals, breast, neck, throat, or vascular structure may cause serious injury and require medical care. CEW use may cause skin irritation, puncture wound, abrasion, mark, rash, burn, or other scar or infection, which may require medical care and may be permanent. As with any injury of this type, infection or tetanus and resulting complications may occur. In accordance with your agency's Guidance, ensure access to medical care if needed.
2. **Follow agency Guidance for removing probes.** Probe removal may cause injury. Leaving a probe in the body may result in pain or injury. Follow your agency's Guidance and biohazard protocols for probe removal. In the case of embedment, organ or bone penetration, or probe, dart point, or barb detachment, immediate medical care and possible surgical removal may be required.
3. **Follow biohazard protocols.** Use appropriate biohazard protocols including isolation procedures and protective equipment (e.g., gloves, masks, and washing of hands and exposed areas as necessary). Follow your agency's Guidance and appropriate biohazard, waste, and evidence protocols when dealing with biohazards.

SAFETY INFORMATION: CEW DEPLOYMENT AND USE



WARNING CEWs and cartridges are weapons and as with any weapon follow safe weapon-handling practices and store your CEW securely. Follow practices herein and additional requirements in your agency's Guidance. Failure to follow these warnings may result in death or serious injury to the user or others.



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⚠ WARNING **Confusing Handgun with CEW.** Confusing a handgun with a CEW could result in death or serious injury. Learn the differences in the physical feel and holstering characteristics between your CEW and your handgun to help avoid confusion. Always follow your agency's Guidance and training.

⚠ WARNING **Trigger Hold-Back Model Differences.** If the trigger is held back, most CEWs will continue to discharge until the trigger is released or the power source is expended. With an APPM installed, the X2 and X26P can be programmed to stop a CEW discharge at 5 seconds *even if the user continues to hold back the trigger*, requiring a deliberate action to re-energize the deployed cartridge. Know your model and how it works. Avoid repeated, prolonged, or continuous CEW applications when practicable.

⚠ WARNING In stressful or noisy circumstances, the APPM's audible warning may not be heard.

1. **Use properly.** Use a CEW only for its intended purpose, in legally justifiable situations, and in accordance with your agency's Guidance. Do not use for torture.
2. **Store in a secure location.** Store CEWs, cartridges, and accessories in secure locations inaccessible to children and other unauthorized persons to prevent inappropriate access or use.
3. **Use the safety switch.** Place the CEW safety switch in the down (SAFE) position when the CEW is not in use. Remember to place the CEW safety switch in the up (ARMED) position when you intend to use the CEW.
4. **Assume CEW is loaded.** Always assume that a CEW is loaded and capable of discharging. To help avoid unexpected discharge, ensure that no live cartridge is in the CEW when inserting a battery pack; TASER CAM™ or TASER CAM HD recorder; or while performing spark tests (except when function testing the X2 or X3), maintenance, data downloading, or battery charging.
5. **Be aware of CEW trigger.** Keep your finger off the trigger until it is legally justifiable to use the CEW and you are ready to deploy.
6. **Know how the CEW works.** Significant differences exist between different TASER CEW models. Before using any CEW, including a multi-shot CEW, ensure you understand the functioning and effects of that model.
7. **Be aware of X2 and X3 deployment mode.** Be aware of which deployment mode (manual or semi-automatic) is set on the X2 and X3 before use.
8. **Be Aware of X2 Static (Fixed) LASER Sight Mode.** The X2 has static dual LASERS. One LASER is intended to approximately align with the top dart and the other with the bottom dart, both of which are set-up for 15' (4.6 meters (m)) and 25' (7.62 m) cartridges at a 15' distance from the target. The trajectory of the 35' (10.7 m) long range cartridge will not line up with the bottom LASER when placed in the X2.
9. **Use simulation (training) cartridges ONLY for training or practice.** DO NOT use a CEW loaded with a simulation training cartridge for field use or self-defense. Simulation cartridges are intended for practice only and will have no incapacitating effect on a subject. Simulation cartridges use non-conductive wires and will not transmit electrical pulses to the probes.

SAFETY INFORMATION: CEW EFFECTIVENESS

A CEW, like any weapon or force option, does not always function as intended and is not effective on every subject. As with any use of force, if a particular option is not effective, consider using other force options, disengaging, or using other alternatives per agency Guidance. **Always have a back-up plan.**

⚠ WARNING **Subject Not Incapacitated.** An ineffective CEW application could increase the risk of death or serious injury to the user, the subject, or others. If a CEW does not operate as intended or if subject is not incapacitated, disengage, redeploy the CEW, or use other force options in accordance with agency Guidance.

A CEW's effects may be limited by many factors, including absence of delivered electrical charge due to misses, clothing disconnect, intermittent connection, or wire breakage; probe locations or spread; subject's

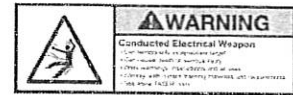
March 1, 2013

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muscle mass; or movement. Some of the factors that may influence the effectiveness of CEW use in effecting or achieving control of a subject include:

- **Subject may not be fully incapacitated.** Even though a subject may be affected by a CEW in one part of his body, the subject may maintain full muscle control of other portions of his body. Control and restrain a subject as soon as possible, and be prepared in case the subject is not fully incapacitated.
- **Subject may recover immediately.** A subject receiving a CEW discharge may immediately regain physical or cognitive abilities upon cessation of the delivered CEW discharge. Control and restrain a subject as soon as possible, and be prepared in case the subject immediately recovers.
- **Drive-stun mode is for pain compliance only.** The use of a handheld CEW in drive-stun mode is painful, but generally does not cause incapacitation. Drive-stun use may not be effective on emotionally disturbed persons or others who may not respond to pain due to a mind-body disconnect. Avoid using repeated drive-stuns on such individuals if compliance is not achieved.
- **Probes may deviate.** CEWs are not precision-aimed weapons. Probe discharge, flight trajectory, and impact location can be affected by numerous factors, including cartridge or probe accuracy; failure of cartridge to properly deploy; strong air movements; user and subject movements; or probe striking subject, clothing, or object with insufficient force or trajectory to penetrate or adhere to subject. Deviations can result in limited or lack of effectiveness due to misses, failure to complete or maintain the electrical circuit, a small probe spread, or failure to deliver a sufficient charge to the subject.
- **CEW or cartridge may fail to fire or operate.** No weapon system, force option, or CEW is always operational or effective. If a CEW, cartridge, or accessory is inoperable or fails to function, consider reloading and redeploying, using other force options, disengaging, or using other alternatives per agency Guidance.

SAFETY INFORMATION: OTHER HAZARDS

WARNING **Probe Recoil or Ricochet.** If your target is farther away than the length of the probe wire, or if one or more probes miss the target, the probe can recoil and bounce back to strike the user or a bystander, causing injury. Probe recoil is more likely with simulation cartridges because of the nylon probe wire used.

Always be sure your target is within range. Wear protective eyewear when deploying any CEW in training or for practice. Be sure practice targets have a firm backing that will allow the probes to stick and not bounce off and strike an unintended person, animal, or object, or continue through the backing and strike objects behind the target.

WARNING **Untethered Discharged Probe.** A discharged probe that does not impact a subject or target may become untethered from the wire and travel a significant distance causing serious injury. Always be sure your target is within range.

WARNING **Fire and Explosion Hazard.** CEW use can result in a fire or explosion when flammable gases, fumes, vapors, liquids, or materials are present. Use of a CEW in presence of fire or explosion hazard could result in death or serious injury. When possible, avoid using a CEW in known flammable hazard conditions.

A CEW can ignite explosive or flammable clothing or materials, liquids, fumes, gases, or vapors (e.g., gasoline, vapor or gas found in sewer lines or methamphetamine labs, butane-type lighters, flammable hair gels or some self-defense sprays). Do not knowingly use a CEW in the presence of any explosive or flammable substance unless the situation justifies the increased risk.

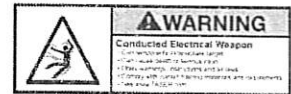
SAFETY INFORMATION: GENERAL PRECAUTIONS

WARNING **Unintentional CEW Deployment or Discharge Hazard.** Unintentional CEW activation or unexpected cartridge discharge could result in death or serious injury to the user, subject, or others.

March 1, 2013

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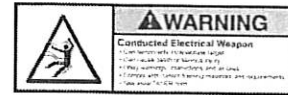
1. **Avoid static electricity.** Keep cartridge away from sources of static electricity. Static electricity can cause a CEW or X26, X26P, or M26 cartridge to discharge unexpectedly, possibly resulting in serious injury.
2. **Keep body parts away from front of CEW or cartridge.** Always keep your hands and body parts away from the front of the CEW and cartridge. If the CEW discharges unexpectedly you could be injured.
3. **Avoid electronic equipment interference.** Electronic transmission equipment close to a CEW could interfere with the proper CEW operation and cause the CEW to deploy or discharge. Keep the CEW at least several inches away from other electronic equipment. Place the CEW safety switch in the down (SAFE) position whenever it is near electronic equipment, including transmitting radios and cell phones. Remember to place the CEW safety switch in the up (ARMED) position before use.
4. **Avoid dropping CEW or cartridge.** If a CEW or cartridge is dropped or damaged it may unintentionally deploy or discharge, become inoperable, or fail to function, making it unsafe for continued use. If a CEW or cartridge has been dropped or damaged refer to the procedure recommended in the current version of the TASER Training materials.

WARNING Failure to maintain a CEW as instructed may cause the CEW to malfunction or fail to function optimally, increasing the risk of death or serious injury. Follow recommended maintenance procedures.

1. **Safely perform spark (function) test before each shift.** Testing helps verify that the CEW is functioning properly. See the current version of the TASER Training materials for further information on testing.
2. **Avoid using a damaged CEW or cartridge.** Do not use a cartridge with a missing blast door unless facing an immediate threat. CEW repair or modification by an unauthorized person may cause the CEW to fire or malfunction, will void the warranty, and may put the user or other person at risk of death or serious injury. Cartridges with blast doors that have been repaired should only be used for training and not for field use.
3. **Update CEW software.** Some CEWs have updateable software. Current CEW software may be obtained by contacting TASER's Customer Service Department or following instructions at www.evidence.com or www.TASER.com.
4. **Use only TASER-approved components, batteries, accessories, and cartridges.** The CEW is a sophisticated electronic system. For proper function, use only TASER-approved components, batteries, accessories, and cartridges with your CEW. Use of anything other than TASER-approved components, batteries, accessories, and cartridges will void the warranty, may cause malfunction, and may put the user or other person at risk of death or serious injury.
5. **Avoid exposure to wet conditions.** If the CEW is drenched or immersed in water or other liquid, **DO NOT** use or attempt to use the CEW until completing the procedure recommended by the manufacturer.
6. **Keep Smart™ cartridge contacts clean.** If the contacts on the Smart cartridge or inside the Smart cartridge bay of the X2 or X3 are not kept clean the CEW may fail to deploy the Smart cartridge.



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7. **Know CEW and cartridge expected useful life.** Under normal storage, handling, and operating conditions, a CEW and cartridges have a 5-year expected useful life. Use or attempted use of a CEW or cartridge after its expected useful life may result in malfunctions and lack of effectiveness. Failure to properly care for and maintain a CEW or cartridge may substantially reduce or eliminate the expected useful life of the product.

SAFETY INFORMATION: HAZARDOUS SUBSTANCES



Hazardous Substances. The CEW (including the cartridge) has components that contain chemicals known to the State of California and others to cause cancer and birth defects or other reproductive harm. Do not disassemble. Refer to your agency's Guidance for proper handling and disposal.

March 1, 2013

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EXHIBIT “Y”

VIRGINIA STATE POLICE

Date of Transcription 5/8/13

CLINTON MATTHEW MANN, 1014 Carr Lane, Halifax, VA 24558, DOB 03-08-83, S.S.# 227-33-2832, telephone numbers: (W) 434-575-7203, and (C) 434-470-4188 was interviewed reference to this case. MANN is a Senior Officer with the South Boston Police Department. MANN was made aware of my identity and the purpose of the interview. MANN related the following information relating to this case:

Around 0330 we had a call at the Super 8 in Riverdale about a 911 call saying the caller needed Police for help and hung up. We responded to the hotel. The dispatch called back and asked for the room number and the guy hung up. We went to Room 223 and knocked on the door. A white male came out and said he did not call. There was no one else there. We checked his cell phone and it was not the phone used to call 911.

Around 0430 we got another 911 call asking for help from the same phone number. CLAY and BRATTON arrived before I did. They were clearing up when I got there. The room they had gone to was that of an elderly couple and they had not called 911.

A little after 0500 we received another call down there. The male subject said he would meet outside. The dispatcher called the Manager of the Hotel and the Manager stated it sounds like the guy in Room # 109 is tearing the room up. Officer CLAY and I go to Room # 109 and hear things being broken up. We knock and identify ourselves.

The guy says they're after me. He opens the door and says come in quick they're after me. People are after me. The subject was sweating profusely his shirt was soaking wet. He pointed to the corner saying they are there help me. He said, I stabbed two people in the room and their blood is on the sheets. I got him out of the room. He stood with Officer CLAY and a deputy. The room was trashed, lights, bed rail off the bed. He was paranoid and seeing things not there and saying he has killed or stabbed people and about things not being there. Officer BRATTON arrived and checked the room and we discussed what to do. We decided to take him to the hospital for a mental evaluation. BRATTON tells him to put his hands behind his back. I couldn't see his hands; she (BRATTON) grabbed his left hand and I grabbed his right hand and she cuffed him. He asked why I was arresting him and I told him we were going to the hospital for help. He was sweating profusely, hallucinating, talking gibberish, and his speech was slurred.

Investigation on 5-4-13 at SOUTH BOSTON, VA File # 13-83-02-0489

by S/A JOHN T. RIEGER Date dictated 5-8-13

This document contains neither recommendations nor conclusions of the Virginia State Police. It is the property of the Virginia State Police and is loaned to your agency; it and its contents are not to be distributed outside your agency.

We put him in Officer CLAY's car and go to the hospital. We follow to the hospital. CLAY pulls straight up to the door and we pull up to the left. We hear a loud noise and glass shattered all over the parking lot from the back passenger window. We run to the car. CLAY is on the driver side rear door and I'm on the passenger side rear door. The subject was scared and paranoid said he needs help they're going to get him. I open the passenger rear door and try to talk to him. The door was open and he comes out head first and fell to the ground. Being very sweaty he slipped by and ran straight to the hospital doors and plowed into the doors, knocking them off track breaking them. He puts his shoulder into the door. Some nurses and one security officer ran to see what was happening. We were trying to get him under control. He was beating on the door. CLAY and BRATTON deployed tasers, both hit the subject and he fell down. When he fell he knocked over a soap dispenser. He jumped up and one tased him again. We told him to stay on the ground. I went to get my leg irons and ran back over. We tried to roll him over on his stomach and he drew back his legs and tried to kick. The subject was tased again for being uncompliant. Officer CLAY was able to get one leg and I got him around his shoulders and flipped him. Officer BRATTON and I held him while CLAY put the leg irons on. He was kicking and trying to get away. He was told he was under arrest and going to jail.

It took all three of us to get him up. He started dragging his feet and we had to carry him to the car and put him in it. We put him in CLAY's car again. He was face down. We turn him on his side and tell him to sit up so we can put the seatbelt on. BRATTON reached through to use the taser but her cartridge was not on. I took prongs, all four and put them in cartridge prior to getting him in the car. He would not get up. BRATTON dry stuns him and he sits up, shut the door, and pick up stuff.

We had to fight to get him in the car. BRATTON's phone got knocked off trying to put him in the car. I picked up the phone and put it on the trunk. BRATTON's cell phone case got knocked off as well and I picked it up also and put it on the trunk. I grabbed the guy's shoulders to pull him into the car. He lies on his back and put his feet out the window screaming, going off in the car. He said he sniffed a little cocaine, smoked weed and was also drinking. We saw a broken vodka bottle in the floor of the room at the hotel.

His feet were still out the window and we needed to get him inside so we could put the seatbelt on him. He was trying to get out. I dry stunned him (with taser). He still wouldn't sit up. BRATTON dry stunned him. He didn't even respond; it didn't faze him. He didn't move. He was talking, saying to go ahead and shoot him, he was squirming around. I picked him up, held him up and Officer CLAY put seatbelt around him and hooked the belt. The belt was pulled tight and the guy tries to bite CLAY. The guy's teeth hit CLAY's thumb but he pulled it out of the way. I go in ER and get gloves. I try to take pictures of the guy in the car and the door of the hospital. He was hitting his head on the window while I was trying to take photos. I took several photos. They left and I caught up at the jail. I walk into the sally port and check on the guy. He was lying in the seat. I call his name, shake him and he does not respond. I call TIFF (BRATTON). I didn't see him breathing and can't get a pulse. BRATTON checks for a pulse and couldn't get one either. I told the guard to open the door and call rescue. We pull the car out of the sally port, take seatbelt off, get him out of the car, cut his shirt off, and start CPR. CLAY started and then I took over. Jailers brought the AED out and BRATTON

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took pads out and on him. The AED said stay clear, it never shocked, it said continue CPR. Rescue got there and took over. Rescue loaded him up and took him to the ER.

EXHIBIT “Z”

05/04/2013

Incident-#13018177

S-Linwood Lambert, Jr.

On 05/04/2013 I responded to the Super 8 Motel for a possible 911 assistance call. The caller was very vague and only stated he needed the police. The caller also stated he was in room 232. Officers Mann, Clay and I went to the room and spoke with a male. The male stated he did not call 911 and everything was OK. The male was white. I asked that male if he had a cell phone and he stated yes. I asked him for his cell number and it did not match the number of the 911 caller. We left that room and asked the manager to check the guest registry for the 911 caller's number. She could not match the 911 caller's number to any guest. We marked the call as unfounded.

Several minutes later Central Dispatch received another set of 911 calls from the same caller who now stated he was in room 132. We returned to the Super 8 Motel and checked room 132. There was an elderly couple that was clearly asleep. I asked that male if he or his wife called 911 and they both stated no. We checked the parking lot of the hotel and the adjoining parking lots in the Riverdale Shopping center. We could not locate the caller. Central Dispatch advised that the caller was calling from the area based on a Phase II reading that they received. Officers Mann, Clay and I checked the area but we could not locate the caller. We cleared the call as unfounded again.

Approximately 30 minutes later we received another 911 call from the same cell phone and caller. The caller advised that he was at the Super 8 Motel in South Boston and he needed the police again. The caller also stated he would come out into the hallway to meet the police. The manager called Central Dispatch and advised that she knew what room he was in because she could hear the person destroying the room. She advised that he was in room 109.

Officer Clay and Mann responded to the call before I arrived on scene. When I arrived Officers Clay and Mann along with Deputy Adams with the Halifax County Sheriff's Office was on scene. Officer Clay and Deputy Adams were standing in the hallway with a black male. The male was wearing a grey shirt and blue jeans.

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I could see that he appeared to be sweating profusely. The top half of his shirt was completely covered in what appeared to be sweat. I spoke to the male and asked him what happened. He stated that there was a lot of blood in the room and it wasn't his. I asked him whose blood was it and he told me that he stabbed 2 people in the room. He directed me to the room.

I walked in the room and I could see that the room was in total disarray. The beds were removed from the frames. The mattresses were removed from the beds and I could see what appeared to be the bed frames leaning against the wall. The light fixtures were broken from the ceiling and the lamps were on the floor and broken. Officer Mann was inside and he was checking the room for any injured persons. We did not locate any injured persons. I checked the bed and I could see a small spot of blood on one of the bed sheets. Officer Mann advised me that the male had a small cut on his hand and the blood on the bed sheet was possibly his. Officer Mann checked the room for any form of identification for the male. He found a credit card with the name Linwood Lambert, Jr. I asked the male where his identification was. He stated it was in his wallet. He provided his social security number and his date of birth. I identified him as Linwood Lambert, Jr. of Richmond, VA. I ran his information through Central Dispatch. He was not wanted.

Officer Mann checked a bag of clothing and he found what appeared to be a uniform. The uniform had a company name unstitched on the front. I checked the room for any signs of legal or illegal drug use. I could not find any prescription pill bottles or any sign of illegal drug paraphernalia. Officer Mann pointed out a broken bottle of Vodka on the floor. The bottle was empty. I asked Linwood if he drank any alcohol. I could not smell any odor associated with an alcoholic beverage coming from his person. He told me that he drank some Vodka. I asked him how much did he drink. He told me that he drank the whole bottle. I asked him if he had any legal drugs or illegal drugs and he told me no. I asked him if he was on any type of medication and he told me no. I asked him if he had any type of medical conditions and he told me no.

I asked him to tell me again what happened to the room. He again stated he stabbed 2 people. I asked him who he stabbed and he did not respond. He stated someone was after him. He told me that he had "Red Beams" pointed at him. I asked him if he meant beams from a gun and he shook his head yes. I asked him who was after him and he again told me that he got into a fight with two people and he stabbed them. I asked him where were the people that he stabbed and he told me to check the ceiling tiles in the room. Officer Mann and I checked the ceiling tiles and there was no sign of dead or living bodies in the ceiling tiles.

I spoke with him several more minutes and I asked him if he wanted to hurt himself. He stated no. I asked him if he felt like hurting anyone else and he again told me about the 2 persons that he stabbed. I determined that we should take him for a possible mental evaluation. I asked him to turn around and put his hands behind his back. He hesitated and started to put his hands in his pockets. Officers Clay, Mann and I removed his hands from his pockets and placed him in handcuffs. I explained to him that he was not under arrest. I told him that we were going to take him to speak with someone to figure out what was going on with him. He complied at that point. He walked calmly out of the hotel and into the parking lot. He seemed to connect with Officer Clay so I asked Officer Clay to transport Linwood to the E.R. Officer Clay agreed. We searched him prior to putting him in Officer Clay's car. All Officers cleared and we proceeded to the Halifax E.R.

I radioed to Central Dispatch to put me in contact with the Mental Health on call case worker. I spoke with Sharron Garrett with Mental Health. I apprised her of the situation and I told her that I would give Linwood a preliminary breathe test to determine his alcohol level. As I was speaking with her I saw Officer Mann start running towards Officer Clay's car. I saw that Linwood had possibly kicked Officer Clay's rear window out. There was shattered glass on the ground. Officers Clay, Mann, and I attempted to remove Linwood from the car. He was now lying in the car with his feet at the rear door. He was kicking the door. We opened the rear door and pulled his feet down. As soon as his feet hit the ground he took off running towards the E.R. sliding double doors. He hit the doors with his shoulders and knocked the doors completely off of the door track.

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I deployed my taser and successfully tasered Linwood. He fell to the ground. He got back up and Officer Clay deployed his taser. Linwood fell again but got back up. I pulled the taser trigger again while the prongs were still in Linwood. He was momentarily debilitated but quickly regained his strength. He began to roll around on the ground in front of the E.R. doors. I yelled for him to roll over on his stomach and remain on his stomach. He continued to roll from side to side. He was able to remove the taser prongs from his body as he rolled. I attempted to taser him again but the prongs were not in his body. The taser did not work. I approached him and attempted to physically stop him from rolling. Officer Mann went to his patrol car and got a set of leg irons to further detain him.

Officers Mann, Clay and I attempted to place the leg irons on Linwood. We all three struggled with him. Officer Clay successfully put the leg irons on Linwood. I sat him up on his back side. I continued to tell him to calm down. As he was rolling on the ground I heard Linwood say that he was on cocaine. He said several times that he was on cocaine. He also said that he was doing "weed." Linwood had a small cut on the top of his head. He sustained the cut from a metal sign that was near the E.R. doors. His head hit the sign when he fell from the taser.

Officers Mann, Clay and I got Linwood up from the ground. I told him that he was now under arrest for property damage to the Super 8 Motel, Officer Clay's window and for disorderly conduct. He stated to me that he was not under arrest. I told him that he was and he again told me that he was not. Linwood refused to walk back to Officer Clay's car. We were forced to drag him to the car. He managed to get him back into the back seat of Officer Clays' car. We got him into the car and he laid down in the back seat. I repeatedly gave him commands to sit up in the car so we could put his seat belt on. He stated he was not going to sit up. I drive- stunned him with the taser in an effort to get him to sit up. We finally got him in the upright position. Officer Mann went to the other side of the car and Officer Clay managed to get the seat belt buckle to Officer Mann to seatbelt Linwood in the car. As Officer Clay pulled the shoulder belt to secure Linwood in the seat belt he bite Officer Clay on the hand.

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I asked Officer Clay if he was O.K. with transporting Linwood to the jail. He stated yes. I offered to drive Officer Clay's car but he stated he was Ok to drive. I followed Officer Clay to the Halifax Blue Ridge jail. Before we arrived I radioed Central Dispatch to call the jail for assistance getting Linwood inside the jail.

Officer Clay entered the Sally Port of the jail and I pulled my patrol car in behind him. I went to Officer Clay's rear door where Linwood was seated and I could see that his eyes were wide open and he appeared to be having a medical emergency. His skin color was grey and he did not appear to be breathing. I asked for the Jail Officers to open the sally port doors to let us out. It took approximately a minute to open the sally port doors to allow us to get out of the jail facility. I checked Linwood's Carotid Artery for a pulse and I could not feel a pulse. Officer Clay radioed for Rescue.

Officer Mann drove the car out of the sally port doors. Officers Mann, Clay and I removed Linwood from the car. We put him on the ground at the jail. I asked a jail Officer for a defibrillator. Officer Mann started giving Linwood CPR. The jail nurse and Officers returned with the defibrillator. Officer Mann continued to do CPR as I operated the defibrillator. Officer Clay relieved Officer Mann with CPR. The defibrillator cycled twice before rescue personnel arrived. It did not advise to shock the patient but to continue CPR. We continued CPR until rescue arrived. Rescue arrived and transported Linwood to the Halifax E.R.

I radioed to contact the Administration.

Officer T.N. Bratton

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EXHIBIT “AA”

VIRGINIA STATE POLICE

Date of Transcription 10/7/13

TIFFANY NICOLE BRATTON, 2224 Old Grubby Road, South Boston, VA 24592, telephone # 434-222-6868 was interviewed at the South Boston Police Department regarding this investigation. BRATTON was made aware of my identity and the purpose of the interview.

BRATTON is a Police Officer with the South Boston Police Department. This follow up interview was conducted regarding the usage of her Department issued Taser during this incident.

The Evidence Sync Device Report was reviewed with BRATTON prior to the interview.

BRATTON stated the first time she attempted to use her Taser she realized the cartridge was not installed so it was a dry stun with no contact with the subject. The second and third discharge was done with the prongs attached to the subject.

BRATTON stated the subject was rolling around on the ground and she probably pulled the trigger on her Taser two or three times and thought something was wrong with it not realizing one of the prongs had come out.

BRATTON stated the subject was lying on his back and she went to dry stun him and the guy grabbed the end of the Taser and was pulling it and she must have been pulling the trigger with the Taser discharging with no contact being made with the subject. BRATTON stated this probably happened several times.

BRATTON stated she dry stunned the subject one time in the car for not being compliant.

BRATTON did not have any further information to provide.

Investigation on 10-4-13 at SOUTH BOSTON, VA File # 13-83-02-0489

by S/A JOHN T. RIEGER Date dictated 10-7-13

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